

**ACCELERATED
HEALTH CARE CAREER TRAINING
INITIATIVE**

**Michigan Department of
Community Health**

**Michigan Department of
Labor & Economic Growth**



STATE OF MICHIGAN

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COMMUNITY HEALTH
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April 11, 2005

Dear Colleague/Regional Skills Alliance Convener:

As you know, the shortage of health care workers in occupations such as nursing, and the allied health fields is a growing and well-documented concern in Michigan and the nation. The Michigan Department of Community Health (DCH) and the Michigan Department of Labor & Economic Growth (DLEG) are working collaboratively to address this challenge. Expanding the capacity of our educational institutions to rapidly train enough high quality workers to meet the growing labor demands of the health care industry is critical to overcoming the health care labor shortage.

We are pleased to announce an exciting new health care training initiative, designed to increase the capacity of our public educational institutions to train more high quality health care workers at an accelerated pace.

Through a local matching fund process, Medicaid Disproportionate Share Hospital (DSH) Funds will be made available to your eligible public training partners (community colleges and public universities) to expand and implement accelerated health care training programs. The primary objectives for the initiative are to support innovative, accelerated training programs focused on nursing and allied health fields, and to produce more well-qualified health care workers at a faster pace without compromising quality.

The application process will require collaboration between the applying publicly funded training institutions and hospitals. It will also require that you be involved in the development of the application to assure that it addresses documented needs of employers in your region, that the training benefits as many employers as possible, and that other relevant Michigan Regional Skills Alliance partners are involved as appropriate.

This initiative is on a very fast track. The proposals must be submitted by May 16, 2005. In order to assist you, we will be notifying your eligible educational partners of this opportunity. We will also conduct an informational meeting on April 22, which we hope you will attend. To take advantage of this exciting opportunity, please review the enclosed materials.

Sincerely,

Janet Olszewski
Director, DCH

David C. Hollister
Director, DLEG

cc: RSA Partner Training Institutions

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Section I

Purpose and General Information

Purpose: To address health care worker shortages through expansion of the capacity of the Michigan higher educational system and to increase the number of well-trained and qualified health care workers in Michigan. For purposes of this initiative, hospitals that have partnered with community colleges and public universities attached to Michigan Regional Skills Alliances (MiRSAs) will be invited to submit proposals to apply for Medicaid Disproportionate Share Hospital (DSH) Funds as outlined in Section III of this document. DSH payments may be made only to Michigan hospitals that meet the Michigan Medicaid State Plan requirements to receive DSH payments.

This training initiative is a collaborative effort between the Michigan Department of Community Health (DCH) and Michigan Department of Labor & Economic Growth (DLEG).

Total Funding: \$10 million dollars in Medicaid DSH Funds for each of the two fiscal years.

Funding Periods: Fiscal Year 2005 (June 2005 – September 2005)
Fiscal Year 2006 (October 1, 2005 – September 2006)

Information Meeting: April 22, 2005, 10:00 a.m. – 12:00 p.m. Lansing
Community College, West Campus, Michigan
Technical Education Center

Deadline for Proposal Submission: All proposals must be received by 5:00 p.m. on May 16, 2005. Submissions may be sent by U.S. mail, overnight/express mail, e-mail (rsa@michigan.gov), or hand delivery. Facsimiles will not be accepted.

Attn: Brenda Njiwaji
Michigan Department of Labor & Economic Growth
Victor Office Center, 5th Floor
201 North Washington Square
Lansing, Michigan 48913

Training Focus Areas:

- 1) Accelerated Nursing Programs
- 2) Accelerated Allied Health Programs

Eligible Applicants: Michigan hospitals that have written Training Agreements with a Michigan publicly funded training institutions (i.e., community colleges and public universities).

Section II

Eligible Training Models

Four training models will be considered for funding. The first three relate to nursing and the fourth to allied health professions. All four models must include accelerated training, retention, and career development components. All training must be conducted by Michigan publicly funded training institutions.

The overall intent of this request for proposals is to target innovative educational programs that demonstrate the ability to decrease the time students need in the educational program, without sacrificing quality, and result in an earlier completion of their programs (including successful licensure, where appropriate) and entry into the nursing or allied health care workforce.

Model A (Certified Nursing Assistant to Licensed Practical Nurse

Projects that identify qualified Certified Nursing Assistants and partner with existing Licensed Practical Nurse programs and long-term care facilities/hospitals to recruit and train these individuals in a one-year program.

The outcome is retention of individuals employed in long-term care, development of a career track to higher paying positions, and a more highly trained health care workforce retaining individuals in the health care sector who might otherwise leave health care or leave the workforce entirely.

Model B (Accelerated Second Degree to Bachelors of Nursing and Registered Nurse [RN])

There are a number of individuals with bachelor degrees (and sometimes master degrees) who have lost jobs, have been laid off, or seek to make a career change in their fields. These individuals are leaving Michigan to seek work elsewhere. Many express interest in changing to nursing careers. There are existing nursing education programs that can prepare these individuals to take the RN licensure exam after a year of full time study and work in the hospital setting.

These projects would create partnerships between baccalaureate nursing education programs and hospitals to recruit and educate these individuals.

This model would help retain a highly educated pool of individuals in Michigan and address the nursing workforce shortage.

Model C (Expanding the Nurse Faculty Workforce)

In spite of the nursing workforce shortage (in Michigan and throughout the nation) thousands of qualified applicants have been turned away from nursing programs. Nursing faculty are in greater shortage than the practicing nurse workforce.

These projects will partner bachelor's and master's prepared nurses, in the hospital setting with Michigan college and university education programs to employ these nurses on a part-time basis to serve as clinical instructors or preceptors for students from the educational partner's programs. This model will serve to relieve current faculty and may also serve as a retention strategy for hospital nurses. It is expected that this will also allow nursing education programs to open additional seats for new students.

NOTE: It is essential for programs receiving grants under this model to include a commitment from the hospital for these nurses to attend clinical instructor/preceptor training that will be offered around the state or as an Internet on-line module.

Model D (Accelerated Allied Health Programs)

Worker shortages in several Allied Health Fields are also a problem. Proposals for training programs to address these shortages will be reviewed and considered.

Example areas would include, but are not limited to, occupations such as:

- Medical Assistants
- Medical Information Technicians (Medical Records)
- Medical Receptionists/Biller
- Pharmacy Technicians
- Physical Therapists Assistant
- Radiography Technologist
- Respiratory Therapist
- Surgical Technologist

The anticipated outcome is adequate numbers of individuals in these occupations to meet the workforce needs of health care industry employers in the region.

Section III

Application Process

1. **Develop an Accelerated Health Care Training Proposal:** As an expanded activity to approved health care focused MiRSAs, Michigan hospitals in partnership with Michigan publicly funded training institutions (community colleges or universities) may develop accelerated health care training proposals. The hospital must be the applicant, partnerships across multiple training institutions, hospitals, and long-term care (LTC) facilities are permitted.
 - The proposal is to be developed based on identified employer-driven workforce needs and the Eligible Training Models (see Section II).
 - The proposal(s) may be written to serve the regional needs of a single hospital, a consortium of hospitals, or a combination of either of the two and other medical industry employers.
 - The proposals will be submitted to the DLEG. A joint review committee including the DCH will review the proposals.
2. **Identify Local Match:** The state share of the DSH payment must be provided through an intergovernmental transfer of funds from a publicly funded community college or university.
3. **Identify the Partnering Training Institution:** In order to provide funding for an approved project, a hospital eligible to receive Medicaid DSH Funds must enter into a written fiduciary agreement with a publicly funded training institution. The initial proposal should at least identify the publicly funded training institution the hospital will partner with. A signed training agreement need not be included with the initial proposal. Once a proposal is approved, funding will not be released until the hospital and its training partner have entered into a written training agreement approved by the DCH (see the Training Agreement, Section V).

4. Choose Training Proposal Options:

- The training proposal may be developed to meet the exclusive workforce needs of the hospital; or to meet the needs of multiple health industry employers in a region.
- The training proposal may be developed to reflect training needed in the region's LTC facilities if the hospital can demonstrate a benefit to the hospital from improved availability of trained personnel in the LTC setting.
- The training proposal may also be developed to meet both the workforce needs of the partnering DSH eligible hospital and LTC facility employers. Proposals that address the needs of multiple hospitals or other health industry employers will be viewed more favorably than those that address the needs of only one employer.

5. **Collaboration with the MiRSA:** The hospital must collaborate with the MiRSA and the public training institution and/or the LTC facilities to: 1) determine and document the workforce and training needs of the hospitals and LTC employers in the region, and 2) to assist in bringing the employers, training institutions, and other partners to the table. The hospital must submit the proposal to the DLEG by the proposal submission deadline. The application must be accompanied by a letter of support from the MiRSA convener.
6. **Proposal Review:** A joint DLEG and DCH review committee will review submitted proposals.
7. **Notification:** The DCH will notify the hospital(s) with a decision on whether or not its proposal is approved.
8. **Matching Funds Transfer:** Once the Training Agreement is approved by the DLEG and the DCH, the publicly funded training institution will be required to transfer an approximately 44 percent cash match, of the total approved budget amount, to the DCH. Specific cash transfer amounts and instructions will be issued prior to the submission of funds. The publicly funded training institution must submit local match funds by U.S. mail or by electronic funds transfer to the DCH.

- Within two to three business days of receiving the publicly funded training institution match, the DCH will transfer funds equal to the approved proposal's budget to the DSH-eligible hospital.
- The hospital receiving the DSH payment agrees to use the funds solely in support of the training agreement it has signed with the publicly funded training institution.

Section IV

Selection Criteria and Proposal Components

Eligible applicants for funding are limited to Michigan hospitals that are eligible to receive DSH payments under the Medicaid program and that have training agreements with publicly funded community colleges or public universities to implement an accelerated health care training program(s) in nursing and allied health fields. The expectation is that the proposed training is employer-driven and being implemented based on demonstrated local workforce demands. The MiRSA must assist in assessing and documenting the workforce and training needs of the employers to be served and in engaging those employers in the training and job placement initiative.

Proposals must include four sections: a narrative summary, narrative, management summary, and a capability and qualifications statement. The content of these sections is detailed below. In addition, an Applicant Information Form must be submitted (See Section VIII.)

1. Narrative Summary

Each proposal must include a double-spaced, Narrative Summary that addresses the five (5) areas below (4 pages maximum):

1. Training Need and Eligible Training Model
2. Increased Training Capacity
3. Degree of Training Acceleration, Quality, and Innovation
4. Plan for Training Retention and Employment Placement
5. Assessment/Evaluation and Tracking

2. Narrative (Maximum 20 pages, double-spaced)

3. Training Need and Eligible Training Model

The proposal must clearly demonstrate why the training is needed and provide data to support the stated need. The proposal must show that the training is hospital driven. What are the local labor market demands in general for the occupational area(s) where training is to be provided? Based on the labor market information and supporting information, the proposal must also describe the Eligible Training Model(s) proposed to address the stated labor market workforce needs (see Eligible Training Models in Section II).

4. Increased Training Capacity

The proposal must clearly demonstrate to what degree the additional resources will increase the capacity of the publicly funded training institution to train more health care workers. The proposal should show a marked difference between baseline and projected training enrollments attributed to additional resources.

5. Degree of Training Acceleration, Quality, and Innovation

The proposal must explain to what degree the training will reduce the training-to-employment time frame for each proposed training area. The proposal will also need to explain how the quality of the training will be maintained. The proposal should also demonstrate how innovative and non-traditional strategies would be employed to facilitate the training period. This would include examples such as web-based and modularized course delivery, more intensive training schedules, and increased clinical rotations.

6. Plan for Training Retention and Employment Placement

The proposal should clearly state what will be done to retain the trainees during the training. This would include such things as remedial training and general student support services. The proposal should also discuss what will be done to place the trainees into employment in their field of study after training. Projected placement rates for the proposed training programs would be helpful.

7. Assessment/Evaluation and Tracking

The proposal should specify the assessment/evaluation process to effectively measure the quality of the training, the number of trainees recruited, completing training, placed in health industry jobs, and retained in jobs.

8. Management Summary

In addition to the Narrative, each proposal must include the following.

- **Management Plan:** The management plan should include specific activities, timeframes, and milestones to clearly demonstrate how the project work will be carried out.
- **Budget:** A detailed, line item budget must be included.
- **Training Plan:** A detailed training plan in a spreadsheet-like format must be submitted. Each training model area should be clearly listed with projected training periods, number of trainees, program costs, and trainee contact hours. (See example training plan in Section VIII.)

9. Capability and Qualifications of Applicant Hospital

The final section of the proposal must indicate the ability of the hospital and its partnered training institution to successfully administer and implement the training program. The qualifications of the personnel to administer and implement the program should be included along with brief resumes or bio-sketches for key personnel. Also, any previous experience the publicly funded training institution has had in the proposed program areas should be included.

Section V

Fiduciary and Training Agreement

A copy of the signed Training Agreement between the hospital and the public training institution must be submitted to the DCH after the proposal has been approved. If a consortium of multiple hospitals or public training institutions is created more than a single Training Agreement may be necessary. Note: Per federal regulation, only hospitals may receive DSH payments from the state. At a minimum, the agreement must also address the items below:

- **Fiduciary Matching and Payment Arrangement**
The agreement must clearly articulate the agreed upon financial arrangement between the partnering hospital and the publicly funded training institution. The arrangement must state that the publicly funded training institution will provide the required local match for the project and demonstrate the partnering hospital's commitment to use the Medicaid DSH Funds to support the proposed accelerated training plan's budget.
- **Fiduciary and Training Partner(s)**
Identify and describe role(s) and responsibilities of the hospital and the educational provider (for training).
- **Training Models**
The agreement must state which eligible training model(s) described in Section II will implemented under the agreement.
- **Audit**
The agreement must reference provisions for an audit to be performed. The audit may be done as a part of the training institution's single audit process.

Section VI

Reporting Requirements

- A **Quarterly Progress Report** based on the State fiscal year (October to September) is to be submitted 30 days after the end of a given quarter to the DLEG. The quarterly narrative must reflect the stated activities, milestones from the approved Management Plan, Budget, and Training Plan.
- A **Completion of Training Report** will be due 45 days after the end of each training program.
- An **Employment Retention Report** will be due 90 days after the training end date for each accelerated training program.
- **Final Program Summary Report** will be due 30 days after the last Employment Retention Report has been submitted.

Section VII

Proposal Components

The proposal must include:

- 1. Narrative Summary**
- 2. Narrative**
- 3. Management Summary, including a management plan, budget, and training plan**
- 4. Capability and Qualifications Statement**
- 5. Applicant Information Form [See Section VIII]**

Section VIII

Applicant Hospital

1. Hospital Name:

Hospital Medicaid I.D. Number:

Address, City, Zip Code:

2. Partnering community college or university:

Address, City, Zip Code:

Township:

County:

3. Please provide the name and contact information for a person authorized to speak on behalf of the proposed project.

Contact Person:

Title:

Contact Telephone Number:

Contact Fax Number:

Contact E-mail address:

4. Authorized Signatures:

For the Hospital:

Signature

Date

Name (Print or type)

Title

For the Training Partner:

Signature

Date

Name (Print or type)

Title

Additional signatures may be required if more than a single hospital or publicly funded training institution is a partner in the proposed project. Each partner institution must sign the proposal.

Section IX

Budget Form

Description	DSH Request (Include match funds.)
Salaries & Fringes Instructional	
Distance Learning Instruction	
Promotion/Outreach	
Assessment/Evaluation	
Trainee/Trainer Travel	
Program Development	
Equipment Rental	
Audit	
Administration (10% max)	
Other (specify)	
Total	

Training Plan

Accelerated Training Program/Occupations	Number of Trainees	Training		Total Program Cost	
		Start Date	End Date	Initiative Funds	Additional Funds
Total					

Filename: Accelerated Health Care Training Initiativev UPDATE.doc
Directory: C:\Documents and Settings\johnsonk11\My Documents\My Web
Projects\MiRSA\Updates
Template: C:\Documents and Settings\johnsonk11\Application
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Title: Purpose: To provide funding to healthcare training initiatives in
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